

August 22, 2018

THE VILLAGE PROJECT, INC.















Mr. John Boyd Chair Mental Health Services Oversight and Accountability Commission 1325 J Street, Suite 1700 Sacramento, CA 95814

Dear Chair Boyd,

On behalf of the signed organizations and individuals we would like to share our concerns with the operations and practices that have occurred at recent Mental Health Services and Accountability Commission (MHSOAC) meetings. These community-based organizations and individuals are experts and advocates for equitable mental health services and have collaborated with the MHSOAC in the past.

There has been a serious lack of oversight of the Commission's meetings which has detrimentally affected the ability of the Commission members and community to proactively engage in the meeting process. For example, at the meeting on July 26, 2018 the Commission took a support position on the Action Item 10: Legislation at a time when only 3 members were still in attendance. Additionally, the Commission has continuously failed to adhere to the agenda which leads to confusion and frustration among community members both in attendance and on the phone.

To assist with rectifying these issues, we have drafted a list of recommendations for the Commission's consideration. We believe that the Strategic Planning Session scheduled for next month in Los Angeles on September 26th, 2018 would provide an optimal venue to review and consider these recommendations.

These recommendations are based on the spirit of the MHSA which clearly focuses on all aspects of the Act being consumer and family driven, and informed by community stakeholders, including those from underserved communities. A paper that provides more context and explanation of each recommendation is being prepared by our group and will be provided to the MHSOAC at least a week before the September 2018 MHSOAC meeting in Los Angeles.

We strongly recommend:

- 1. The Commission take up action items on the agenda before informational items, with the exception of the Executive Director's report.
- 2. MHSOAC agenda items not be moved or removed without explanations to the public as to why the item is being moved or removed.
- 3. The Commission not vote on items without a quorum present, unless Commissioners or members of the public express no concerns in regards to that specific item.
- 4. The Commission not vote on items that have not been clearly identified on the agenda, or already specifically discussed at a meeting sponsored by the MHSOAC and open to the public.
- 5. Commissioners with real or potential conflicts of interest acknowledge the conflict publicly when the agenda item is taken up. Commissioners should recuse themselves from discussion and/or voting on the item when appropriate.
- 6. Complex items on the MHSOAC meeting agenda that require a vote or approval be discussed beforehand at either an MHSOAC-sponsored committee meeting or special meeting that is open to the public.
- 7. The MHSOAC re-institute Committee meetings that are open to the public. (An alternative is to have two-day Commission meetings.) If the Commission is to continue involvement with legislation, including the California State Budget, then a Legislative Committee definitely needs to be instituted.

- 8. The MHSOAC not move forward with additional special projects (e.g. the Criminal Justice and Mental Health; Schools and Mental Health) that are not required by the law or the legislature unless the MHSOAC has both resources and time to take these on. Technical assistance and approval of County Innovation Plans, development of regulations, etc., should take priority over these special projects.
- 9. The MHSOAC staff not initiate or assist with legislation without knowledge and approval of the Commission as a whole. This includes state budget items.
- 10. Projects for the MHSOAC not be initiated before the Commission as a whole and community stakeholders have the opportunity to provide public comment.
- 11. The MHSOAC not conduct "invitation only" meetings with only certain public stakeholders unless these are announced publicly with the reason why the meeting is limited to those particular stakeholders.
- 12. General technical assistance meetings to counties include public stakeholders and be open to the public.

We look forward to discussing these recommendations with Commissioners and MHSOAC staff at any meetings open to the public including the MHSA Partners Forum.

Sincerely,

Stacie Hiramoto, MSW

Stace Hiramoto

Director, Racial and Ethnic Mental Health Disparities Coalition (REMHDCO)

Darlene Prettyman, RN, OAC Commissioner Emeritus

Mel Mason, LCSW

Executive Director, The Village Project, Inc. (Monterey County)

Ben Hudson, Jr.

Executive Director, Gender Health Center (Sacramento County)

Ford Kuramoto DSW, LSCW

President, Magna Systems (Los Angeles County)

Beatrice Lee

Executive Director, Diversity in Health Training Institute (Alameda County)

Deborah Lee, Ph.D.

Former Consultant and Staff to the MHSOAC (San Francisco)

Janet King

Native American Health Center, CRDP Partner Phases I and II (SF Bay Area)

Gulshan Yusufzai

Executive Director, Muslim American Society – Social Services Foundation (Sacramento County)

Nicki King, Ph.D.

Project Director – African American Health Institute (San Bernardino County)

Russell Vergara, MSW

Former Co-Chair of the California MHSA Multicultural Coalition (Orange County)

Jim Gilmer

Former Co-Chair of the California MHSA Multicultural Coalition (Ventura)

Najeeb Kamil

REMHDCO Steering Committee Member (Alameda and Santa Clara Counties)

Marisol Beas

Student at University of California, Davis (Transition Age Youth)

Kathryn G. Kietzman, PhD, MSW

California Mental Health Older Adult System of Care Project (Los Angeles)

Eddie M. Lamon

Member - SAAC 6/SLT (Los Angeles County